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CONFIRMATION NO. 9046

Bib Data Sheet

SERIAL NUMBER 10/646,197	FILING DATE 08/22/2003 RULE	CLASS 123	GROUP ART UNIT 3748	ATTORNEY DOCKET NO. 018367-9819-00
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APPLICANTS

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** CONTINUING DATA ****

None

** FOREIGN APPLICATIONS ****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/14/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 9	TOTAL CLAIMS 63/31	INDEPENDENT CLAIMS 4/2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature <i>CL</i>	Initials		

ADDRESS

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TITLE

Valve-operating lever

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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